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DRAFT
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PTO/SB/22 (10-00)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)
CIBT-P01-120RECEIVED
SEP 19 2002

TECH CENTER 1600/2900

In re Application of	Miller et al.	
Application Number	Filed	
08/920272	August 22, 1997	
For:	PHARMACEUTICALS CONTAINING MULTIPOTENTIAL PRECURSOR CELLS FROM TISSUES CONTAINING SENSORY RECEPTORS	
Group Art Unit	1646	Examiner
		J. Murphy

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- | | |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 920.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |
|
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 460.00 | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-1945 | |

I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

- | |
|---|
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). |
| <input checked="" type="checkbox"/> attorney or agent of record. |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). |

Registration number if acting under 37 CFR 1.34(a)



Signature

David P. Halstead, Ph.D.
Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

1 forms are submitted.

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